

DEPARTMENT OF HOMELAND SECURITY
REQUEST TO CONDUCT A FFF SPECIAL AWARENESS EVENT

5 C.F.R. § 950.602

EVENT INFORMATION			
Requestor Name:		Date of event:	
Agency, Branch, Unit:		Email Address:	
Phone:	Type of Event:		
Description of Event (Please be specific. Specify how the event will be conducted and what prizes or items, if any, will be used):			
Event Location:			
Estimated number of Event Organizers: _____		Estimated time spent by organizers of the event (total): _____ hours	
Estimated # of participants in the event: _____		Estimated time spent by participants in this event (total): _____ hours	
EVENT CHECKLIST			
<input type="checkbox"/> Employees will only use a de minimis amount of Government time, approved by their supervisor, to participate in the event.			
<input type="checkbox"/> Non-Federal sources will not be solicited to provide free goods, services, or money.			
<input type="checkbox"/> Participation in the event will be voluntary.			
<input type="checkbox"/> Fees will not be charged to participate in the event, however suggested food donations may be made.			
<input type="checkbox"/> Appropriated funds will not be used to support the event.			
<input type="checkbox"/> This event will be fully conducted on Government-owned or leased property.			
<input type="checkbox"/> No individual charities will be endorsed, showcased, or otherwise promoted at this event.			
<input type="checkbox"/> I have attached any flyers, copy of email, or other promotional materials to this request for management and ethics review.			
<input type="checkbox"/> Attire for the event will be business appropriate or as approved.			
If you were unable to check any box above, please explain here:			
I hereby certify that to the best of my knowledge the above provided information is true. I also certify that, to the best of my knowledge, there are no other issues involved with holding this event that would create the appearance of impropriety.			
Event Coordinator's Name:	Phone:	Event Coordinator's Signature:	Date: